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| Application Number | 10/696,313 |
| Filing Date | October 30, 2003 |
| First Named Inventor | CACI, CLAUDE |
| Art Unit | 2683 |
| Examiner Name | J. EWART |
| Attorney Docket Number | T3707-908524 |

Total Number of Pages in This Submission

ENCLOSURES (check all that apply)

- | | | |
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| <input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Issue Fee – Part B – Fee(s) Transmittal <input type="checkbox"/> Other Enclosure(s) (please identify below): |
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Remarks

☒ The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 50-1165 (T3707-908524) for the above identified docket number.**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

| | |
|--------------|--------------------------------------|
| Firm Name | Customer No. 000181 |
| Signature | |
| Printed Name | James T. Carmichael, Reg. No. 45,306 |
| Date | December 1, 2005 |

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